

# Smoking Habit among Secondary School Students

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## ABSTRACT

Smoking is a menace all over the world and Bangladesh is no exception. The knowledge on harmful effects of smoking seems to be widespread but still the prevalence of smoking is known to be increasing in the developing countries. Although smoking is not a good habit and is known to be associated with lung cancer, cardiovascular, respiratory, urogenital, elementary systems and others diseases, a large proportion of our population is addicted to it irrespective of age, caste, creed and status. This cross sectional study was conducted in selective secondary high school in Dhaka City. The main objective of the study was to assess the smoking habit and their influencing factors among the school students. Data were collected from 294 students using self administered questionnaire. Data analysis revealed that out of 294 students 76.9% were boys and the rest were girls (22.7%) with boys and girls ratio was 3.3:1. The mean age of the students was 14.3 years (SD) 1.0 years ranging from 12 years to 18 years. Among the studied students 11.2% were currently smokers. The most frequent type of smoking was cigarette (84.8%) followed by bidi. Peer pressure (72.7%) appeared to be the main factors for smoking followed by father's smoking. However, a good number of student's did not mention any reason. Bi-variate analysis shows that tobacco use was significantly associated with age, sex, class and family size ( $p < 0.05$ ) indicating smoking was found to be higher among older students aged 16 years and above and male sex. It was also higher among the student of class X. The finding of this study suggests that as smoking is gradually increasing among the students. As smoking is usually initiated during adolescence, it should be a public health priority to educate this group regarding the hazards of smoking, so that their behavior can be modified. So, strong legislative measure is warranted to prevent the consequence of tobacco use among the younger segment of the population.

**Key Words: Smoking, Students, Cancer, Secondary**

## INTRODUCTION

It is a well establish fact that the smoking is injurious to health and it also responsible for some irreversible changes in human body. It is injurious not only to those who smoke, but also equally harmful to those who live with the smokers. Epidemiological studies have been shown that tobacco smoking plays an important role in the causation of wide range of disease such as various forms of cancer, bronchitis, ulcer etc. Tobacco smoking has also been found to be associated with induced abortion, still birth and neonatal deaths (WHO 1975).<sup>2</sup> The WHO expert committee on smoking and its effect on health came across with the evidences that millions of lives had been adversely affected by cigarette smoking every year (WHO 1983).<sup>3</sup>

A more grown up child builds a gang with his fellows to smoke just like the adults smoke in a gossip. They have an inborn eager to gain newer experience, so finding his dear friends to be with a stick he feels eager to take one and gradually becomes habituated. Sometimes, just for the sake of courtesy or non-smoker friends may take a cigarette with his smoking friends and thus gradually become a habituated smoker. Smoking is taken as a part of entertainment extending from rural area by offering hukka and Biri to high social class giving filter tipped cigarette. Cigarette smoking being a very cheap way of entertainment has gained in popularity and curiosity increased among the children. Tobacco is one of the main agricultural products of Bangladesh and ranks fourth after jute, Sugarcane and tea. It is one of the important revenue earning items. But about 60% of the total population use tobacco in one or the other forms. The annual consumption of tobacco per person is about 1.80 pound<sup>4</sup>

## JUSTIFICATION OF THE STUDY

Non-communicable diseases are a growing public health concern globally. Tobacco use is an important risk factor for many non-communicable diseases many of which are among the causes of premature mortality. Globally Tobacco associated deaths exceed 4.5 million annually, thus surpassing deaths caused by malaria, tuberculosis, and mental causes. However, tobacco use has not received as much attention as have some of these other disease. Tobacco is the single most important preventable cause of disease and premature death in the world today. Tobacco causes about three and a half million deaths throughout the world and kills nearly 10,000 people worldwide every day (WHO, 2002a). Tobacco is a known cause of about 25 diseases and its impact on global disease burden is increasing continuously (WHO, 2002b).<sup>7</sup>

### Research question

What is the pattern of smoking habit among secondary school children?

### Research objectives

#### General objective

1. To determine the habit of smoking any secondary school students.

#### Specific objectives

1. To determine the pattern of smoking among the secondary school Students.
2. To determine socio –economic family profile of the smoker.

## METHODOLOGY

The study was undertaken with the objectives to assess the smoking habit among the secondary school students. The study was carried out with the following methodology. A cross sectional study was conducted among the Secondary school students in different school in Dhaka city. The study was conducted over the period of 3 (Three) months, dated from April 2009 to June 2009. Students who are read in class viii, class ix and class x. were purposively selected and permission from the appropriate authority was sought for data collection. A self administered questionnaire was used to collect data .After collection of data; they were edited through checking and rechecking. Data analysis was done by computer aided statistical Software SPSS version 12. Data were presented in the form tables and graphs.

## RESULTS

**Table 1: Distribution of the respondents by age**

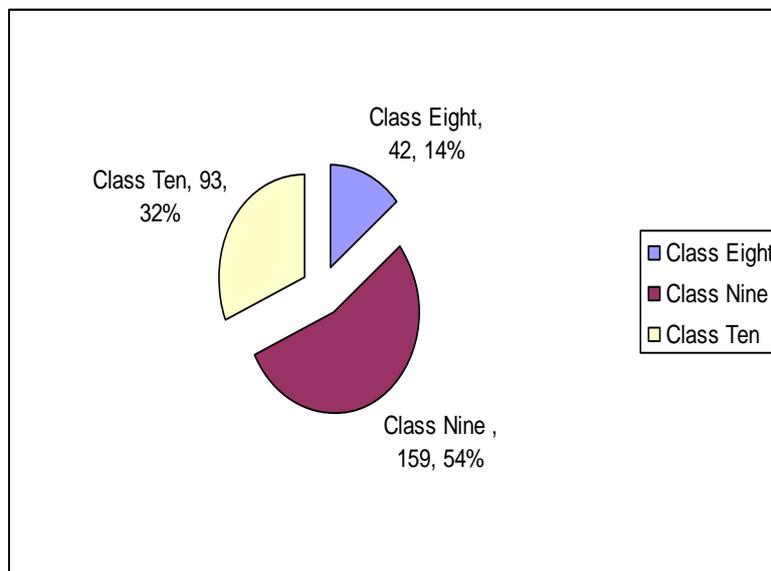
Age in years	Frequency	%
≤13	55	18.7
14	125	42.4
15	90	30.5
≥16	24	8.1
<b>Total</b>	<b>294</b>	<b>100.0</b>

The mean age of the students was 14.3 years (SD) 1.0 years, in the minimum age 12 years and maximum 18 years. More than two fifth (42.4%) of the students were years of age followed by 15 years (30.5%), 18.7% were in the age less than 13 years and 8.1% were in the age group 16 and above years.

**Table -2: Distribution of the respondents by sex**

Sex	Frequency	%
Male	226	76.9
Female	68	22.7
<b>Total</b>	<b>294</b>	<b>100.0</b>

Out of 294 students, 226 (76.9%) were boys and the rest were girls (22.7%). The boys and girls ratio was 3.3:1.



**Figure 1. Distribution of the respondents by level of education**

Out of 294 students, 42(14.2%) were Class Eight, 159 (54.1%) were Class Nine, 93(31.6 %) were from Class Ten.

**Table-3. Distribution of the respondents by marital status**

Marital status	Frequency	%
Unmarried	291	99.0
Married	3	1.0
Total	294	100.0

The study found out of 294 students, 291 (99.0%) were Unmarried and 3 (1.0%) were married.

**Table -4. Distribution of the respondents by present Smoking status**

Smoking status	Frequency	%
Yes	33	11.2
No	128	43.5
Never smoking	133	45.2
Total	294	100.0

Data shows that, 33(11.2%) were Smoking 128(43.5%) were Non smoking, 133(45.2%) were never smoking.

**Table -5. Distribution of the respondents by Pattern of smoking status**

Pattern of smoking	Frequency	%
Cigarette	28	84.8
Cigarette and Bidi	3	9.1
Bidi	1	3.0
Pipe	1	3.0
Total	33	100.0

Out of 33 of the students, 28(84.8%) were Cigarette, 3(9.1%) were Cigarette +Bidi, 1(3.0%) were Bidi and Pipe smoker.

**Table -6. Distribution of the smoker respondents by Frequency of smoking**

Frequency of smoking	Frequency	%
1-2	15	45.5
3-4	11	33.3
≥5	7	21.2
Total	33	100.0

Out of 33 of the students, 15(45.5%) were 1-2 times, 11(33.3%) were 3-4 times, 7(21.2%) were 5+ times per day smoke. Median frequency 3.0 times. Minimum =1 times and Maximum =15 times.

**Table -7. Distribution of the respondents by starting age at smoking (years)**

Starting age at smoking	Number	%
8-10	4	12.1
10-12	10	30.3
12-14	13	39.4
≥15	6	18.2
Total	33	100.0

Out of 33 of the students, 4(12.1%) were 8-10 years, 10(30.3%) were 10-12 years, 13(39.4%) were 12-14 years, 6(18.2%) were 15 + years starting age at smoking. Median frequency 12 years. Minimum =8 years and Maximum =18 years.

**Table -8. Distribution of the respondents by Factors influencing smoking**

Factors influencing smoking	Number	%
Peer pressure	24	72.7
No reasons	14	42.4
Father's smoking	7	21.2
Imitation	3	9.1

Percentage exceeds 100 due to multiple responses. The studied students reportedly mention that Peer pressure appeared to the main influencing factors for smoking (72.7%) followed by fathers smoking (21.2%) were Imitation (9.1%). However, (42.4%) did not mention any reasons.

**Table -9: Distribution of the students by level of education and tobacco use**

Level of education	Tobacco use			
	Yes		No	
	No.	%	No.	%
Class Eight	2	4.8	40	95.2
Class Nine	15	9.4	144	90.0
Class Ten	18	19.4	75	80.6
<b>Total</b>	<b>35</b>	<b>11.9</b>	<b>259</b>	<b>88.1</b>

Highest percentage of students at Class Ten were smoked 18(19.4%) and lowest percentages were Class Eight 2(4.8%). Analysis found statistically significant association between tobacco use level of education (<p 0.05) indicating students of class x were more smoker that than others.

## DISCUSSION

Teenage smoking continues to present a significant public health problem. Children begin to smoke in elementary school or in high school. A great number of studies have been conducted on smoking habits in adolescents; prevalence was reported to be 24.1% in Italy and over 30% in the USA after the 7th grade. Studies in Turkey indicate prevalence between 18% and 43% among secondary school students (6-8).

The mean age of the students was 14.3.±1.0 years. Out of 294 students, 226(76.9%) were boys and the rest were girls (22.7%). The boys and girls ratio was 3.3:1. Majority of the students were Unmarried, 291(99.0%) were Unmarried and 3(1.0%) were married, and their level of education, (14.2%) were Class Eight, 159 (54.1%) were Class Nine, 93(31.6 %) were Class Ten. Analysis found statistically significant association between tobacco use and level of education (<p 0.05) and indicating students of class - X were more smoker that than others.

The analysis shows that present Smoking status, Out of 294 students, 33(11.2%) were Smoking 128 (43.5%) were Non smoking, 133(45.2%) were never smoking, and among 33 smoker students more Cigarette smokes 28(84.8%) than others group of tobacco and minimum 1 times and maximum 15 times per day smoke. Median frequency 3.0 times. Their maximum starting age at smoking 12-14 years.

Peer influence was found to be a strong predictor of smoking initiation in almost all studies that included these measures. The studied students reportedly mention that Peer pressure appeared to be the main influencing factors for smoking (72.7%) followed by fathers smoking (21.2%) were Imitation (9.1%). However, (42.4%) did not mention any reasons and most frequent Place of smoking was Public place (66.7%), Home (33.3%). Smoking habit influence with their pocket money.

The chances of success in both smoker and nonsmoker respondents opinioned that they have the knowledge about the bad effects of smoking. They think that the habit of smoking should be given up.

## CONCLUSIONS & RECOMMENDATIONS

In our study we concluded that younger students of schools are more included towards this bad habit. It has been found that majority of the smokers were influenced by friends and families specially fathers for starting smoking. The rate of taking cigarette is usually increased during the class of nine and ten. It is found that cent percent of the smokers have the knowledge of the ill effects of smoking, yet the smoke. Peer pressure appeared to be the main influencing factors for smoking. The students are all about known as health problem due to tobacco use. The study revealed that majority of the students were aware about the consequences of smoking, but one tenth of the students are habituated with smoking. Consciously or unconsciously students start smoking at an early age, gradually become habituated and ultimately lead to addiction. The smoking habit has been a prominent cause of health hazards. An awareness of such problems relating to health and welfare is required to be brought about among the students and public. Multi-faceted effective action to be taken to control smoking. There is need to develop a sound strategy of motivational efforts.

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